

**COUNTY OF LOS ANGELES – TREASURER AND TAX COLLECTOR  
BUSINESS LICENSE INVESTIGATION REPORT**

Account# 141901

Application for  
**ENTERTAINMENT GENERAL WITHOUT DANCE**

Date  
**01/21/15**

|  |   |  |                   |  |   | Hearing Date  |
|--|---|--|-------------------|--|---|---|
| D.B.A.   |   | Organization or Corporation  |                   |  | Incorporation Date  |   |
| <b>LA MELODY</b>   |   | <b>LA MELODY ENTERTAINMENT INC</b>                                       |                   |  | <b>8/7/2013</b>   |   |
| Address of Proposed Activity   |   | Contacted  |                   |  | Date Contacted  |   |
| <b>18888 Labin Ct. #C201<br/>Rowland Heights, CA 91748</b>   |   |  |                   |  | <b>01/20/15</b>   |   |
| Applicant, Sponsoring Adult or Corporate Officer   |   |  |                   | Position   |   | Ever Arrested   |
| <b>1. Jingbin Zhang</b>  |   |  |                   | <b>CEO</b>   |   | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Address  |   | Hgt.   | Wgt.              | Hair   | Eyes  | DOB   |
| [REDACTED]   |   |  |                   | <b>BROWN</b>   | <b>BROWN</b>  | <b>10/11/68</b>   |
|  |   |  |                   |  |   | <b>China</b>  |
| Applicant, Sponsoring Adult or Corporate Officer   |   |  |                   | Position   |   | Ever Arrested   |
| <b>2. Shude Feng</b>   |   |  |                   | <b>Secretary</b>   |   | Yes <input type="checkbox"/> No <input type="checkbox"/>            |
| Address  |   | Hgt.   | Wgt.              | Hair   | Eyes  | DOB   |
|  |   |  |                   | <b>BROWN</b>   | <b>BLUE</b>   |   |
| Applicant, Sponsoring Adult or Corporate Officer   |   |  |                   | Position   |   | Ever Arrested   |
| <b>3. Liqiang Pang</b>   |   |  |                   | <b>CFO</b>   |   | Yes <input type="checkbox"/> No <input type="checkbox"/>            |
| Address  |   | Hgt.   | Wgt.              | Hair   | Eyes  | DOB   |
|  |   |  |                   | <b>BROWN</b>   | <b>BROWN</b>  |   |
| Applicant, Sponsoring Adult or Corporate Officer   |   |  |                   | Position   |   | Ever Arrested   |
| <b>4.</b>  |   |  |                   |  |   | Yes <input type="checkbox"/> No <input type="checkbox"/>            |
| Address  |   | Hgt.   | Wgt.              | Hair   | Eyes  | DOB   |
|  |   |  |                   | <b>BROWN</b>   | <b>BROWN</b>  |   |
| Applicant, Sponsoring Adult or Corporate Officer   |   |  |                   | Position   |   | Ever Arrested   |
| <b>5.</b>  |   |  |                   |  |   | Yes <input type="checkbox"/> No <input type="checkbox"/>            |
| Address  |   | Hgt.   | Wgt.              | Hair   | Eyes  | DOB   |
|  |   |  |                   | <b>BROWN</b>   | <b>BROWN</b>  |   |
| Location   |   |  |                   |  |   |   |
| <input type="checkbox"/> Owned <input checked="" type="checkbox"/> Leased <input type="checkbox"/> Sub-Leased From Whom: <b>Pearl of the East RTC LP</b> |   |  |                   |  |   |   |
| Termination Date of Lease  |   | Immediate Vicinity   |                   | School or Churches   |   | Hearing Notice Posted   |
| <b>06/30/23</b>  |   | <b>Restuarants and Shops</b>   |                   | <b>No</b>  |   |   |
| Charitable Activity  | Proposed Date of Activity   | Age Group  | Admission Charged | Amount   | Security Guards   |   |
| <b>No</b>  | <b>N/A</b>  | <b>All Ages</b>  | <b>No</b>         | <b>N/A</b>   | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> No. <b>Patrol</b> |   |
| Estimated Attendance   | Posted Capacity   | Parking – Location   | Number            | Paved  | Lighting  |   |
| <b>40</b>  | <b>100</b>  | <b>Shopping Center</b>   | <b>100+</b>       | <b>Yes</b>   | <b>Adequate</b>   |   |
| Outside Signs  |   |  |                   |  | Interior Lightning  |   |
| <b>Out Front</b>   |   |  |                   |  | <b>Adequate</b>   |   |
| Alcoholic Beverages  |   | Type ABC License   |                   | ABC Licensed Issued To   |   |   |
| Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>  |   | <b>N/A</b>   |                   | <b>N/A</b>   |   |   |
| Location Previously Licensed   |   | Applicant Previously Licensed  |                   | License Suspended, Revoked, or Denied                                    |   |   |
| Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date   |   | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date |                   | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date |   |   |
| Type   |   | Type   |                   | Type   |   |   |
| <b>N/A</b>   |   | <b>N/A</b>   |                   | <b>N/A</b>   |   |   |
| Date Started Operation   | Billiard Tables   | State Board Number   |                   |  |   |   |
| <b>08/01/13</b>  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Number <b>N/A</b> | <b>SR AP 102438636</b>   |                   |  |   |   |
| Attire   | Type of Food Served   | Entertainment (Describe)   |                   |  |   |   |
| <b>Logo shirts and pants</b>   | <b>N/A</b>  | <b>Karaoke</b>   |                   |  |   |   |
| Hours of Operation   | Days of Operation   | County License Number  |                   |  |   |   |
| <b>Sun - Sat 2pm - 2am</b>   | <b>7 days a week</b>  | <b>141901</b>  |                   |  |   |   |

| Description of Vehicles |      | Model | Vehicle License Number | County License Number |
|-------------------------|------|-------|------------------------|-----------------------|
| Year                    | Make |       |                        |                       |
|                         |      |       |                        |                       |
|                         |      |       |                        |                       |
|                         |      |       |                        |                       |

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Color Scheme and Insignia on vehicles

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Schedule of Rates

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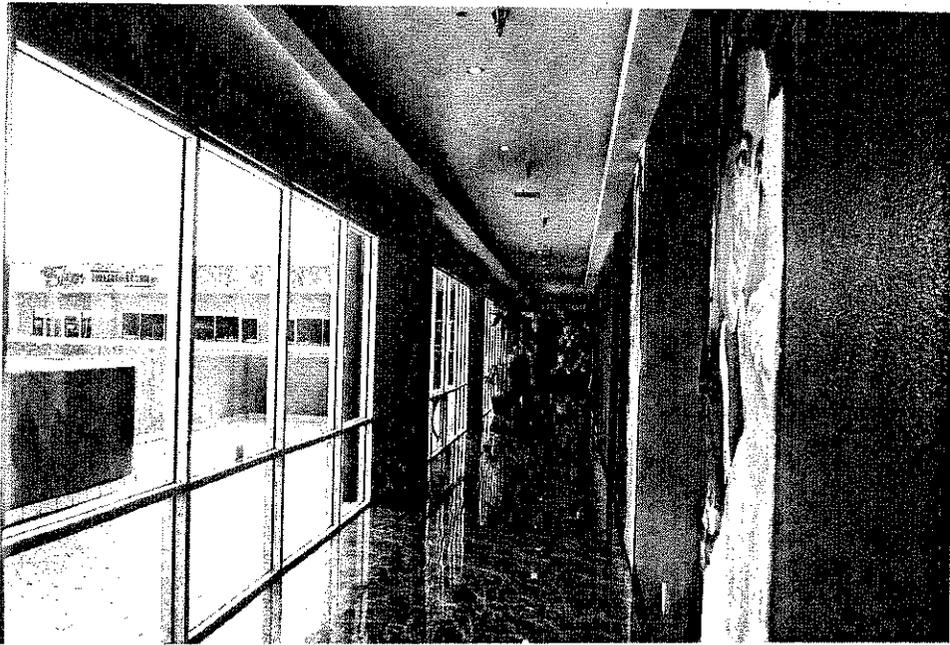
Additional Information

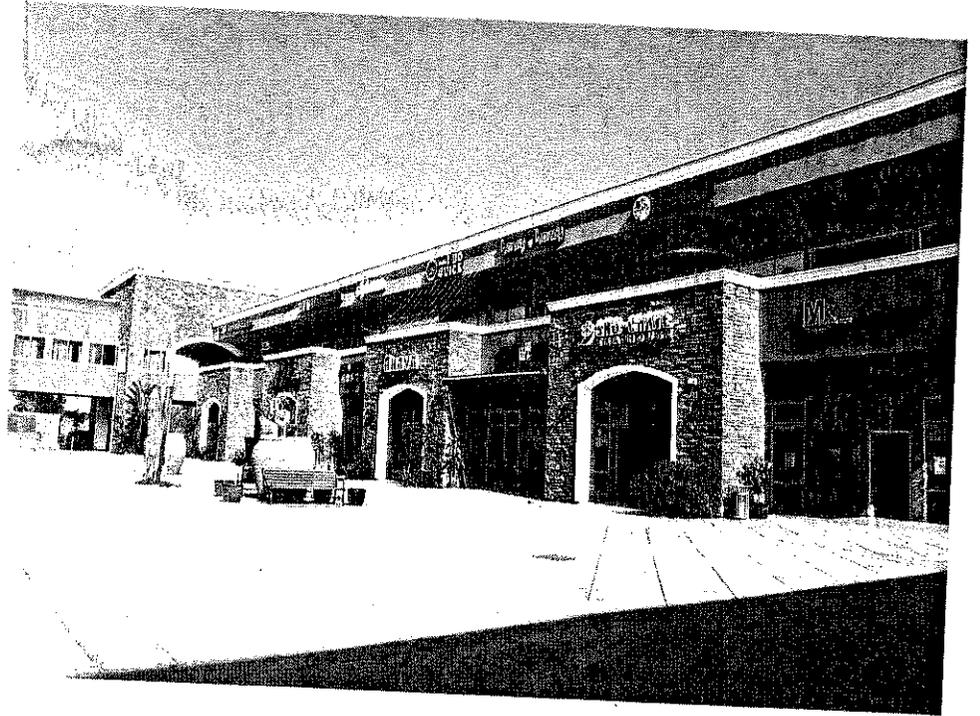
**O. Partida**  
Investigated By

01/21/15  
Date

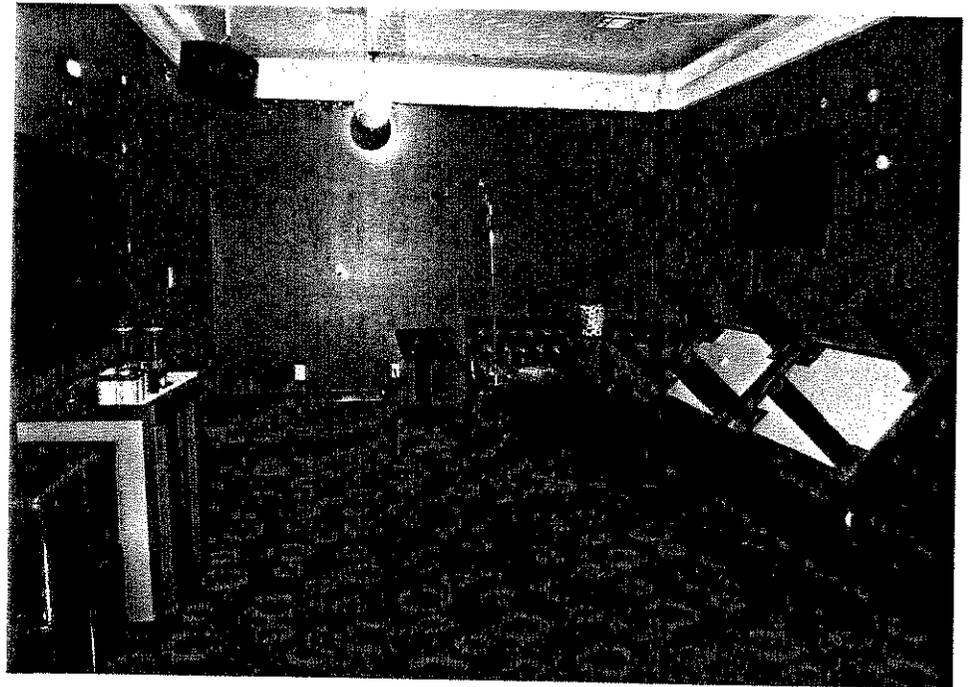
Reviewed By

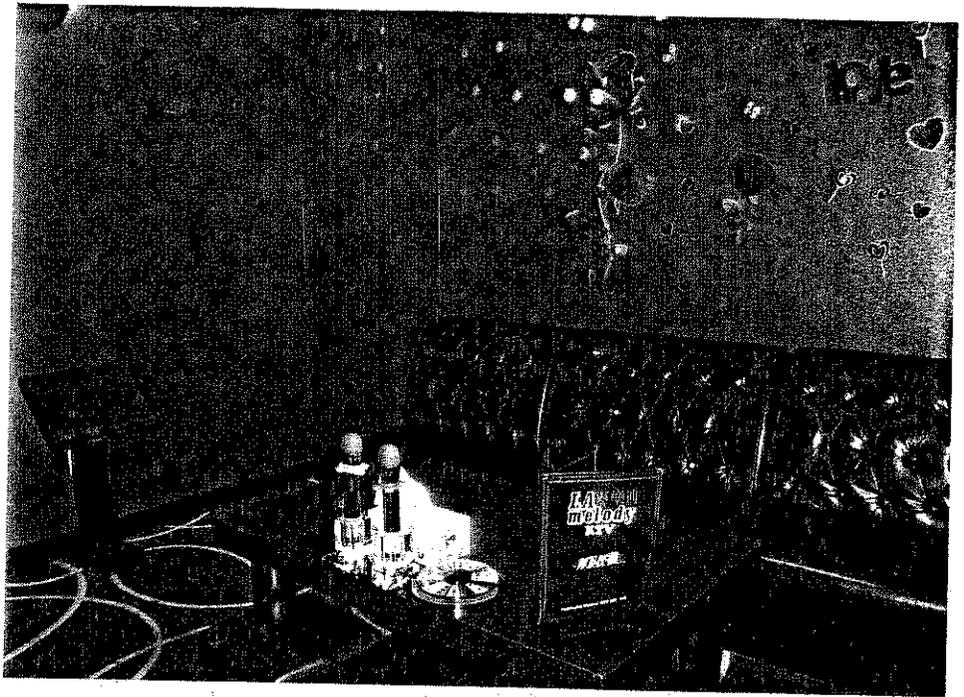
Date

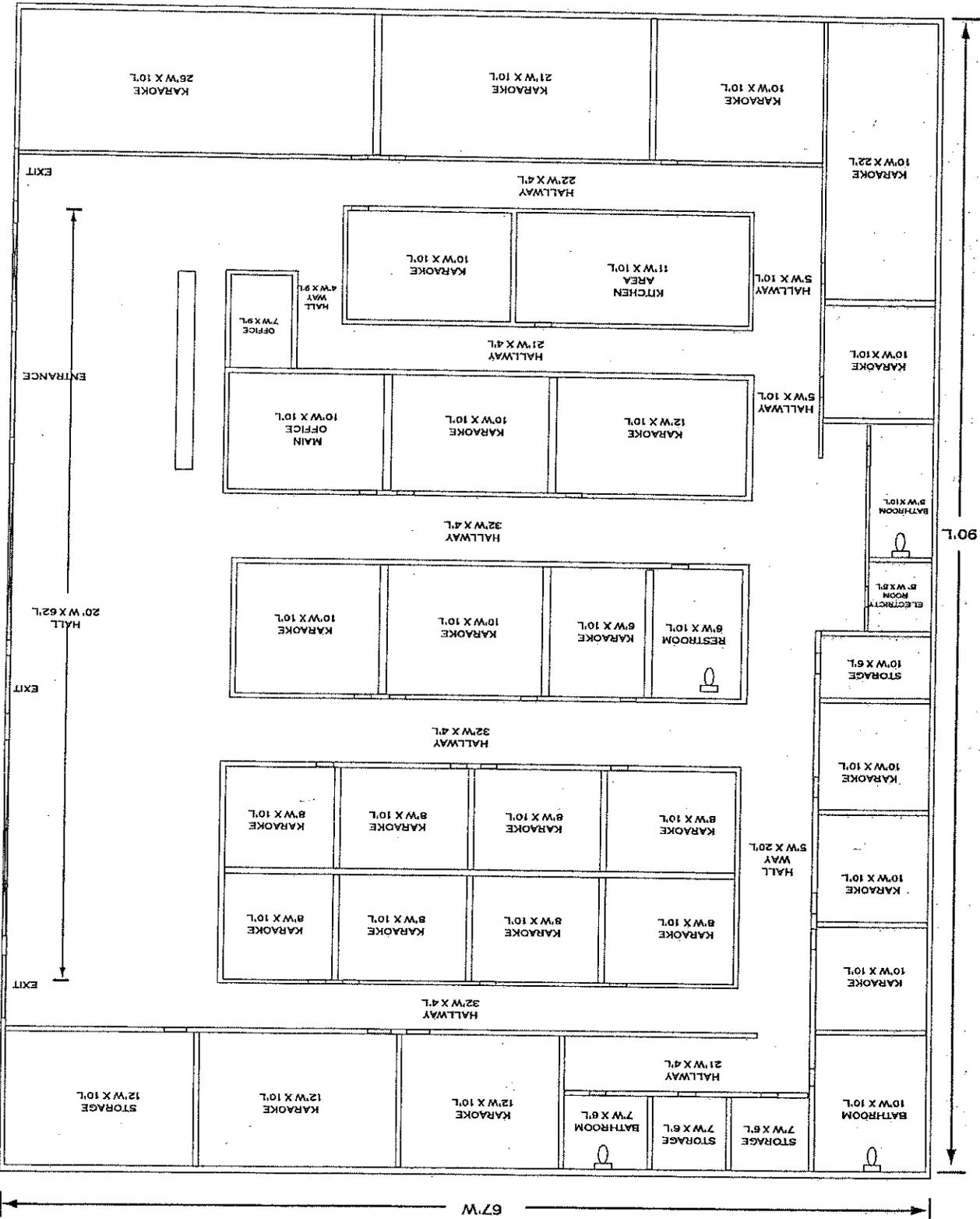




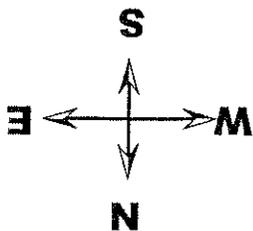








FLOOR PLAN



L.A. MELODY  
 18888 LABIN CT # C - 201  
 ROWLAND HEIGHTS, CA 91748  
 NOT TO SCALE  
 BY: M. BEJARANO #2  
 DATE: 02-5-2015





Los Angeles County Treasurer and Tax Collector  
**Application for Business License**



Please note: *Business License fees are NOT refundable*

Fee: \$ \_\_\_\_\_

ID # 141901

**BUSINESS INFORMATION**

|   |  |   |  |
|---|--|---|--|
| Type of Business: <u>Public Eating<br/>Entertainment w/ Dance</u>   |  | Address of Business: <u>18888 Labin Court # C201 Rowland Heights CA 91748</u> |  |
|   |  | Business Telephone: <u>626-800-1000</u>                                       |  |
| DBA (Business Name): <u>L.A. Melody Entertainment INC.</u>  |  | Mailing Address: <u>shoupeng88@hotmail.com</u>                                |  |
| Sellers Permit # (State Board of Equalization):   |  |   |  |
| Business Ownership Structure: Single Owner <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> |  |   |  |
| If LLC or Corporation, the information below is required:   |  |   |  |
| Date of Incorporation:  |  | Incorporated in the State of:   |  |
| Exact Corporate Name:   |  |   |  |
| Names of Officers   |  | Addresses   |  |
|   |  |   |  |
|   |  |   |  |
|   |  |   |  |
|   |  |   |  |
|   |  |   |  |
|   |  |   |  |

**APPLICANT INFORMATION**

|  |                                  |   |
|--|----------------------------------|---|
| Applicant's Full Name: <u>Jing Bin Zhang</u>                             |                                  |   |
| Home Address: [REDACTED]   |                                  |   |
| Home Telephone:  | Cell Phone:                      | Email address: <u>kingdom_ej@sina.com</u>                           |
| Social Security #: [REDACTED]  | Date of Birth: <u>10/11/1968</u> | Place of Birth: <u>China</u>  |
| Driver's License or State ID#:   |                                  | Expiration Date: [REDACTED]   |
| Male <input checked="" type="checkbox"/> Female <input type="checkbox"/> | Height <u>5'10</u>               | Weight <u>155 LB</u> Hair Color <u>Black</u> Eye Color <u>Brown</u> |

The information contained herein is true and correct to the best of my knowledge and belief. As a condition of the issuance of the Business License applied for, I agree to submit any additional information that may be required, to conduct all phases of this Business License in accordance with regulations established for such business and to maintain all trucks and/or equipment that may be used in connection therewith in conformance with all applicable laws, ordinances and regulations.

Date: 12/3/14 Applicant's Signature: [Signature]  
 Application taken by: D.D. Date: 12/3/2014

\* If you suspect fraud or wrongdoing by a County of Los Angeles employee, report it to the fraud hotline at 1(800) 544-6861

**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE  
APPLICATION REFERRAL**

KIND OF BUSINESS: ENTERTAINMENT-GENERAL

ADDRESS OF BUSINESS: 18388 LABIN CT. C201, ROWLAND HEIGHTS, CA 91748

TELEPHONE: (626) 800-1000

OWNER OF BUSINESS: ENTERTAINMENT L.A. MELODY

CAL. DR. LIC.# : G49676828

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: LA MELODY

MAILING ADDRESS: 18388 LABIN CT. C201, ROWLAND HEIGHTS, CA 91748

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

**BUSINESS LICENSE COMMISSION  
LA COUNTY**

APPROVAL

DENIAL

RECOMMENDATION:

- Post "No Alcohol Beverages Allowed" signs in the facility
- Post "Any complaints, please contact Management at (\*\*\*) \*\*\* \*\*\*\*\*" signs outside of the facility
- Hire security guard during business hours
- If requested, make available the security tapes for the Los Angeles County Sheriff
- Follow the Conditional Use Permit that was issued by the County
- Keep Balcony window closed during business hours

SIGNATURE: \_\_\_\_\_



DATE: \_\_\_\_\_

7/9/15

BASIC LICENSE NO. 2811

DATE 12/04/14

IDENTIFICATION NUMBER 141901



**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90012



**BUSINESS LICENSE APPLICATION REFERRAL  
SUMMARY SHEET**

**KIND OF BUSINESS: ENTERTAINMENT-GENERAL**

**ADDRESS OF BUSINESS: 18888 LABIN CT. C201, ROWLAND HEIGHTS, CA 91748**

**TELEPHONE: (626) 800-1000**

**OWNER OF BUSINESS: ENTERTAINMENT L.A. MELODY**

**CAL. DR. LIC.#** [REDACTED]

**NAME OF PERSON FINGERPRINTED:**

**FICTITIOUS NAME: LA MELODY**

**MAILING ADDRESS: 18888 LABIN CT. C201, ROWLAND HEIGHTS, CA 91748**

**DATE THAT YOU STARTED BUSINESS:**

**PREVIOUS OWNER'S NAME, IF KNOWN:**

**THIS IS AN APPLICATION FOR: NEW LICENSE**

|   | <u>APPROVED</u> | <u>DATE</u> | <u>SIGNATURE</u> |
|---|-----------------|-------------|------------------|
| <input type="checkbox"/> 1. Animal Care & Control                   | _____           | _____       | _____            |
| <input type="checkbox"/> 2. Risk Management                         | _____           | _____       | _____            |
| <input checked="" type="checkbox"/> 3. Building & Safety            | YES             | 08/18/15    | tchen            |
| <input checked="" type="checkbox"/> 4. Fire Department              | YES             | 03/05/15    | tchen            |
| <input type="checkbox"/> 5. Public Health                           | _____           | _____       | _____            |
| <input checked="" type="checkbox"/> 6. Treasurer & Tax Collector    | YES             | 02/12/15    | tchen            |
| <input checked="" type="checkbox"/> 7. Business License Commission  | _____           | _____       | _____            |
| <input type="checkbox"/> 8. Sheriff Department                      | _____           | _____       | _____            |
| <input checked="" type="checkbox"/> 9. Regional Planning Commission | YES             | 12/04/14    | tchen            |
| <input type="checkbox"/> 10. Weights and Measures                   | _____           | _____       | _____            |
| <input checked="" type="checkbox"/> 11. Publishing                  | YES             | 08/21/15    | tchen            |
| <input type="checkbox"/> 12. Public Works - EPD                     | _____           | _____       | _____            |
| <input checked="" type="checkbox"/> 13. Sheriff Fingerprint         | YES             | 01/08/15    | tchen            |

Conditions:



**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970



**BUSINESS LICENSE  
APPLICATION REFERRAL**

KIND OF BUSINESS: ENTERTAINMENT-GENERAL

ADDRESS OF BUSINESS: 18888 LABIN CT. C201, ROWLAND HEIGHTS, CA 91748

TELEPHONE: (626) 800-1000

OWNER OF BUSINESS: ENTERTAINMENT L.A. MELODY

CAL. DR. LIC.#: [REDACTED]

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: LA MELODY

MAILING ADDRESS: 18888 LABIN CT. C201, ROWLAND HEIGHTS, CA 91748

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

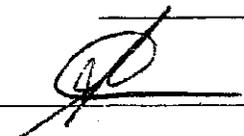
THIS IS AN APPLICATION FOR: NEW LICENSE

**BUILDING & SAFETY  
LA COUNTY**

APPROVAL

DENIAL

RECOMMENDATION: \_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: 

DATE: 8/11/15

Mar-05-2015 08:39am From=LACOFD FIRE MARSHAL

3238904055

T-303 P.003 F-132

Jan-12-2015 01:38pm From=LACOFD FIRE MARSHAL

3238904055

T-230 P.006/020 F-878

**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE  
APPLICATION REFERRAL**

KIND OF BUSINESS: ENTERTAINMENT-GENERAL

ADDRESS OF BUSINESS: 18888 LABIN CT. C201, ROWLAND HEIGHTS, CA 91748

TELEPHONE: (626) 800-1000

*FS 145-13A*

OWNER OF BUSINESS: ENTERTAINMENT LA MELODY

CAL. DR. LIC.# [REDACTED]

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: LA MELODY

MAILING ADDRESS: 18888 LABIN CT. C201, ROWLAND HEIGHTS, CA 91748

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

**FIRE DEPARTMENT  
LA COUNTY**

APPROVAL

DENIAL

RECOMMENDATION: \_\_\_\_\_

SIGNATURE: *[Signature]* 13A

DATE: 3-4-15

BASIC LICENSE NO. 2811

DATE 12/04/14

IDENTIFICATION NUMBER 141901



COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR  
BUSINESS LICENSE SECTION  
REVENUE & ENFORCEMENT DIVISION

TO: DEPARTMENT OF REGIONAL PLANNING  
320 W. TEMPLE STREET, 13<sup>TH</sup> FLOOR, ROOM 1360  
LOS ANGELES, CALIFORNIA 90012

FROM: BUSINESS LICENSE SECTION  
225 NORTH HILL STREET ROOM 109  
LOS ANGELES, CALIFORNIA 90012

DEPARTMENT OF REGIONAL PLANNING FEE: ~~XXXXXX~~  
\$365.00

TELEPHONE: (213) 974-2011  
FAX: (213) 633-5427

DATE: 10 17 14

RBUS 201400422  
ID#: R2014-03095

TYPE OF BUSINESS AND CODE: ENTERTAINMENT w/o DANCE  
PUBLIC EATING

BUSINESS ADDRESS: 18888 LABIN CT # C201

CITY: ROWLAND HEIGHTS APN#: 91748 8761-011-020

NAME OF OWNER: SHU DE FENG PHONE#: 626 586 8171 (CHINA)

D.B.A./NAME OF BUSINESS: LA MELODY KTV CELL PHONE#: 626.818.9279 (English)

MAILING ADDRESS: 18888 LABIN CT # C201

E-mail ADDRESS: \_\_\_\_\_

To be completed by Regional Planning

EXISTING USE: New  Renewal ( )  
RBUS 201400422  
PROJECT # R2014-03095

CELL PHONE #: \_\_\_\_\_

USE PERMITTED IN ZONE C-3-BE USE NOT PERMITTED IN ZONE: \_\_\_\_\_

APPROVED  DENIED: \_\_\_\_\_

REMARKS: Approved per RCVF 201200073

DEPARTMENT OF REGIONAL PLANNING  
320 W. TEMPLE STREET,  
HALL OF RECORDS  
LOS ANGELES, CALIFORNIA 90012

SIGNATURE: [Signature] DATE: 12/3/14

COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR

225 N. Hill Street Room 109, P.O. Box 545 70, Los Angeles, CA 90054-0970

BUSINESS LICENSE  
APPLICATION REFERRAL

KIND OF BUSINESS: ENTERTAINMENT-GENERAL

ADDRESS OF BUSINESS: 18888 LABIN CT. C201, ROWLAND HEIGHTS, CA 91748

TELEPHONE: (626) 800-1000

OWNER OF BUSINESS: ENTERTAINMENT L.A. MELODY

CAL. DR. LIC.#: [REDACTED]

ZHANG, JINGBIN

914-01475

NAME OF PERSON FINGERPRINTED:

FENG, SHUDE

915-00017

PAO, LIGIANG

915-00018

FICTITIOUS NAME: LA MELODY

MAILING ADDRESS: 18888 LABIN CT. C201, ROWLAND HEIGHTS, CA 91748

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

SHERIFF FINGERPRINT

LA COUNTY

APPROVAL

DENIAL

RECOMMENDATION:

*Approved*

SIGNATURE:

*[Signature]*

DATE:

1/7/15